Applicant: Minas Theodore Coroneo Attorney's Docket No.: 37528-503N01US

Serial No.: 10/579,330 Filed: August 8, 2006

Page : 2 of 6

Amendments to the Claims:

This listing of claims will replace all prior versions, and listings of claims, in the application:

Listing of Claims:

1-18. (canceled)

- 19. (Currently amended) An ocular pressure spike shunt for insertion into an ocular paracentesis incision port following ocular surgery, comprising a flexible fluid transfer tube formed of biocompatible material, preferably biocompatible elastomeric material, so as to allow paracentesis incision closure around said tube, having a distal end on an inner surface of a cornea and a proximal end on an outer surface of the cornea, a tubular portion having a lumen, the tubular portion disposed between said distal end and said proximal end to allow fluid communication through said tube, wherein said distal end and proximal end both have an enlarged diameter relative to a diameter of a central section of said shunt, said lumen containing a valve for controlling pressure in the eye following ocular surgery, which valve opens permitting fluid flow through said tube when a predetermined pressure is exceeded, said shunt being configured such that on insertion into a paracentesis port said proximal end is substantially flush with the outer surface of the cornea and a portion of the enlarged diameter of the distal end is positioned flat against the inner surface of the cornea, and said distal end opens into the anterior chamber of the eye, wherein the tube is removable from the eye.
- 20. (Previously presented) A shunt according to claim 19 wherein said predetermined pressure is 10 mm Hg.

Applicant: Minas Theodore Coroneo Attorney's Docket No.: 37528-503N01US

Serial No.: 10/579,330 Filed: August 8, 2006

Page : 3 of 6

21. (Currently amended) A method for preventing ocular pressure spikes following ocular surgery wherein a paracentesis incision port is formed in the eye during said surgery, comprising introducing an ocular pressure spike shunt into said paracentesis port at the conclusion of ocular surgery, said shunt comprising a flexible fluid transfer tube formed of biocompatible material, preferably biocompatible elastomeric material, so as to allow paracentesis incision closure around said tube, having a distal end on an inner surface of a cornea and a proximal end on an outer surface of the cornea, a tubular portion having a lumen, the tubular portion disposed between said distal end and said proximal end to allow fluid communication through said tube, wherein said distal end and proximal end both have an enlarged diameter relative to a diameter of a central section of said shunt, said lumen containing a valve for controlling pressure in the eye following ocular surgery, which valve opens permitting fluid flow through said tube when a predetermined pressure is exceeded, said shunt. being configured such that on insertion into a paracentesis port said proximal end is substantially flush with the outer surface of the cornea and a portion of the enlarged diameter of the distal end is positioned flat against the inner surface of the cornea, and said distal end extends into the anterior chamber of the eye, wherein the tube is removable from the eye.

22-30. (Canceled)

31. (New) An ocular pressure spike as in claim 19, wherein the tubular portion has a length equal to a thickness of the cornea.